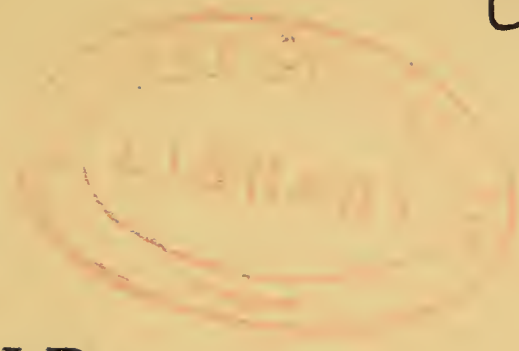


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UCKFIELD
RURAL DISTRICT COUNCIL

THE
ANNUAL REPORT
OF THE
Medical Officer of Health
FOR THE YEAR
1936

JUNE, 1937



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UCKFIELD
RURAL DISTRICT COUNCIL

THE
ANNUAL REPORT

OF THE
Medical Officer of Health

FOR THE YEAR

1936

JUNE, 1937

TO THE MEMBERS OF THE UCKFIELD RURAL DISTRICT COUNCIL.

MR. CHAIRMAN, MADAM AND GENTLEMEN,

I have the honour to submit the Annual Report on the Public Health Services of the District for the year 1936.

The report is in accordance with Article 17 (5) of the Sanitary Officers (Outside London) Regulations 1935, and in conformance with the Ministry of Health Circular 1561 of October 1936.

Diphtheria immunisation is now an established part of the Public Health Service of the district. This Council was the first of the rural districts in East Sussex and among the first in the country to adopt diphtheria immunisation. The progress of the scheme is outlined in the Report.

During the year, main water supply or main drainage has been provided to more villages, evidence of the Council's concern for the public health service of the district. These provisions while earning the gratification of those districts now afforded such services, have prompted other districts to request the same amenities.

I have ventured the opinion that were the cost not a necessary consideration main water and main drainage would be available throughout the rural district whether the requirements were urgent or not.

It is stressed in the report that wells and cesspools require to be kept in repair and failure to do this underlies some of the applications for these services. The ratepayers may be assured, however, that the Health and Housing Committee gives its earnest attention to applications made to them concerning these two important provisions of local government in rural areas.

Reference is made in the report to school closure as a means of preventing the spread of infection among school children. Were the ventilation and heating of schools efficient, school closure even in an influenza epidemic, would be unnecessary.

The time is ripe for the Board of Education or the Ministry of Health to revise the existing Circular on School Closure.

I am grateful for the careful consideration of my monthly reports and for the encouragement given on many occasions by the Health and Housing Committee.

My thanks are also due to the members of the Public Health Department for their loyal co-operation during the year and I am again indebted to Mr. T. Burdett, Chief Sanitary Inspector, for his ready and helpful collaboration in the work of the department.

I have the honour to be,

Your obedient Servant,

R. SYDNEY DAVIDSON,

Medical Officer of Health.

HEALTH AND HOUSING COMMITTEE.

From 1st January—31st March, 1936.

Chairman—Mr. F. H. Nias.

Deputy Chairman—Mr. R. Coates.

Major-Genl. Sir Hugh Bruce Williams.	Col. G. R. Miller.
Mr. T. S. Butler.	Mr. J. E. Morfett.
Mr. H. C. Corke.	Mr. J. R. Owen.
Mr. J. Mathison Fraser.	Mr. F. Rendle.
Mr. H. Grinham.	Mr. A. T. H. Smith.
Mr. H. C. Harbord.	Mr. S. Tooth.
Mr. D. Horscroft.	Mr. E. A. Wallis.
Mr. H. W. Keef.	Mr. G. Watson.
Mr. A. M. McNeile.	Mr. G. N. Worters (Chairman of the Council).

From 1st April—31st December, 1936.

Chairman—Mr. F. H. Nias.

Deputy Chairman—Mr. G. Watson.

Major-Genl. Sir Hugh Bruce Williams.	Col. G. R. Miller.
Mr. T. S. Butler.	Mr. J. E. Morfett.
Mr. H. C. Corke.	Mr. J. R. Owen.
Mr. J. Mathison Fraser.	Mr. F. Rendle.
Mr. H. C. Harbord.	Mr. A. T. H. Smith.
Mr. D. Horscroft.	Mr. S. Tooth.
Mr. H. W. Keef.	Mr. E. A. Wallis.
Mr. A. M. McNeile.	Mr. G. N. Worters.
	Dr. E. A. Wharton.

STAFF OF THE PUBLIC HEALTH DEPARTMENT.

Medical Officer of Health, Assistant County School Medical Officer, and Medical Superintendent High Grove Isolation Hospital

R. Sydney Davidson, M.R.C.S.,
L.R.C.P., D.P.H.

Sanitary Inspectors:—

Chief Sanitary Inspector	*T. Burdett, F.I.S.E., M.R.S.I.
District Sanitary Inspectors	G. F. Hawkins, Cert. S.I.B., C.R.S.I. (Meat and Foods). T. S. Watts, Cert. S.I.B., C.R.S.I. (Meat and Foods) (Resigned 29.1.36). J. W. Good, Cert. S.I.B., C.R.S.I. (Meat and Foods) (Appointed 2.3.36).

Medical Officer of Health's Clerk ... Miss M. J. Baldock.

Chief Sanitary Inspector's Clerk ... Miss E. M. Lock (Resigned 7.3.36).
Mr. Ed. Harrison (Appointed 2.3.36).

* Also holds Offices of Surveyor and Town Planning Officer.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area 112,099 acres.

Population:—

Registrar General's estimate of resident population for mid-1936	...	...	...	...	...	...	...	38,480
Population, 1931 Census	...	...	...	...	...	...	...	38,239
Density of Population per acre	...	...	...	...	...	...	...	0.34

Number of Inhabited Houses (end of 1936) according to Rate Books 11,613

Rateable Value (31st December, 1936) £280,768

Sum represented by a Penny Rate £1,096 0 7

The slight increases in the population of the area during the last two years have been due to an influx of new residents. The increase in the population for the year is 320, but since the number of births exceed the number of deaths by 30, this figure must be subtracted from the apparent increase to obtain the actual number of new residents in the district.

This influx of new residents is bound to continue as the facilities for travel increase and the population growth will be at the expense of the larger towns.

The Uckfield Rural District is well suited to those desiring to live in the country but within easy reach of the city or the seaside, and as pointed out in previous annual reports few parts of the district lack the amenities of electric light, main water supply and main drainage.

The industrial character of the district remains unchanged, the land and its yield forming the bulk of employment.

The unemployment figures are slightly above the corresponding figures for the previous year with the exception of Wadhurst, where there is a slight decrease.

UNEMPLOYMENT FIGURES.

Crowborough.

			Males	Females		Total
Quarter ended	31st March, 1936	...	73	6	—	79
"	30th June, 1936	...	47	10	—	57
"	30th September, 1936	...	81	11	—	92
"	31st December, 1936	...	113	11	—	124

Uckfield.

Quarter ended	31st March, 1936	...	46	3	—	49
"	30th June, 1936	...	39	7	—	46
"	30th September, 1936	...	42	8	—	50
"	31st December, 1936	...	105	15	—	120

Wadhurst.

Quarter ended	31st March, 1936	...	20	8	—	28
"	30th June, 1936	...	16	4	—	20
"	30th September, 1936	...	16	2	—	18
"	31st December, 1936	...	15	1	—	16

This branch office covers an area a part of which is outside the Uckfield Rural District.

VITAL STATISTICS.

Live Births.						<i>Total</i>	<i>Males</i>	<i>Females</i>
Legitimate	...	...	...	...	...	465	238	227
Illegitimate	...	...	...	...	...	16	11	5
Total Live Births						481	249	232

BIRTH RATE per 1,000 of estimated resident population ... 12.5

Stillbirths.						<i>Total</i>	<i>Males</i>	<i>Females</i>
Legitimate	...	...	...	...	...	24	15	9
Illegitimate	...	...	...	...	...	1	—	1
Total Stillbirths						25	15	10

RATE per 1,000 total (live and still) births ... 49.4

Deaths.						<i>Total</i>	<i>Males</i>	<i>Females</i>
						451	238	213
CRUDE DEATH RATE per 1,000 estimated resident population								11.72
STANDARDISED DEATH RATE per 1,000 estimated resident population						...	...	9.49

Deaths from Puerperal Causes.

(Headings 29 and 30 of the Registrar-General's Short List.)

No. 29.	Puerperal Sepsis	...	...	...	...	...	...	Nil
No. 30.	Other puerperal causes	...	...	...	...	...	...	Nil

Death Rate of Infants under One Year of age.

All infants per 1,000 live births	...	...	...	...	...	...	...	49.9
Legitimate infants per 1,000 legitimate live births	...	...	...	...	...	...	...	49.4
Illegitimate infants per 1,000 illegitimate live births	...	...	...	...	...	...	...	62.5

Total Deaths from Cancer ... 73

Total Deaths from Measles (all ages) ... 1

Total Deaths from Whooping Cough (all ages) ... 1

Total Deaths from Diarrhoea (under 2 years of age) ... 1

There have been fewer deaths and more live births this year than last, giving a higher birth rate and a lower death rate than the 11.92 and 10.7 respectively of 1935. Both rates are again below those for England and Wales as a whole.

The causes of death in the district are again tabulated and it will be seen that deaths from Heart Disease and Cancer comprise the two largest groups.

The table giving the mortality in age groups shows that 61.9% of the deaths are in persons over 65 years of age and 78% in persons over 55 years.

There were 24 deaths in infants under the age of 12 months. Of these 9 were due to premature birth, malformation or difficult labour and death occurred within a few days of birth.

The causes of infantile deaths are here tabulated.

CAUSE OF DEATH.	MALES.	FEMALES.
Pulmonary Atelectasis. Birth by lower sigmoid ceasarean section. ...		5 hours.
Basal Meningitis—Osteomyelitis of humerus. ...		5 months.
Cerebral Haemorrhage—Difficult Labour. ...		8 hours.
Premature Birth.	5 hours. 2 mins. 1 day.	10 hours. 9 days. 7 days.
Gastritis—Marasmus.		2 months.
Broncho-Pneumonia.	2 months. 11 months. 1 month.	4 months.
Lobar Pneumonia—Whooping Cough.		11 months.
Gonococcal Septicaemia—Ophthalmia and Vulva vaginitis.		2 months.
Cardiac failure whilst under general anesthetic during operation for Hare Lip.		3 months.
Acute Gastro-enteritis.	4 months.	
Misadventure—Suffocation.	3 months.	9 months.
Convulsions.	2 months.	
Convulsions—Cerebral Malformation.	3 days.	
Intestinal Obstruction—Imperforate Anus. ...	6 days.	
Acute Leukaemia.	6 months.	

TOTAL DEATHS.

	<i>Males. Females. Total.</i>		
Measles.	—	I	I
Whooping Cough.	—	I	I
Diphtheria.	—	I	I
Influenza.	2	I	3
Tuberculosis of Respiratory System.	9	5	14
Other Tuberculosis.	3	—	3
Cancer.	32	41	73
Diabetes.	3	2	5
Cerebral Haemorrhage.	6	14	20
Heart Disease.	76	49	125
Other Circulatory Diseases.	12	10	22
Bronchitis.	6	4	10
Pneumonia (all forms).	11	11	11
Other Respiratory Diseases.	2	3	5
Peptic Ulcer.	2	I	3
Diarrhoea under 2 years.	I	—	I
Appendicitis.	I	I	2
Liver Diseases.	I	—	I

Digestive Diseases.	...	...	...	...	...	...	3	5	8
Acute and Chronic Nephritis.	...	...	...	...	...	...	7	6	13
Congenital Debility, Premature Birth, etc.	...	...	...	...	...	...	6	7	13
Senility.	...	...	...	...	...	...	10	15	25
Suicide.	...	...	...	...	...	...	6	3	9
Other Violence.	...	...	...	...	...	...	11	8	19
Other Defined Diseases.	...	...	...	...	...	...	28	24	52
							238	213	451

Mortality in Age Groups.

AGE GROUPS.						Number of Deaths.		
						Males	Females	Total.
0	...	...	...	...	...	12	12	24
1	...	...	...	...	...	1	1	2
5	...	...	...	...	...	2	2	4
10	...	...	...	...	...	1	—	1
15	...	...	...	...	...	7	3	10
25	...	...	...	...	...	5	3	8
35	...	...	...	...	...	9	7	16
45	...	...	...	...	...	13	21	34
55	...	...	...	...	...	40	33	73
65	...	...	...	...	...	70	45	115
75 and over	...	...	...	...	...	78	86	164
TOTALS	...	...	...	...	...	238	213	451

BIRTH RATES AND DEATH RATES IN THE YEAR 1936.
(England and Wales, London, 122 Great Towns and 143 Smaller Towns.)

	RATE PER 1,000 POPULATION		ANNUAL DEATH-RATE PER 1,000 POPULATION.	RATE PER 1,000 LIVE BIRTHS.
	Live Births	Still Births	ALL CAUSES.	TOTAL DEATHS UNDER 1 YEAR
ENGLAND AND WALES ...	14.8	0.61	12.1	59
122 County Boroughs and Great Towns, including London ...	14.9	0.67	12.3	63
143 Smaller Towns (Resident populations 25,000 to 50,000 at 1931 Census)	15.0	0.64	11.5	55
UCKFIELD RURAL ...	12.5	0.65	9.49	49.9

GENERAL PROVISION OF HEALTH SERVICES.

These remain as previously outlined in the 1934 and 1935 Annual Reports.

During the year 109 throat swabs, 28 nose swabs, 26 specimens of sputum, 2 specimens of blood and one of pus were submitted for bacteriological examination to the Clinical Research Association, London.

The Annual Report of the Medical Superintendent of the East Grinstead Urban and Uckfield Rural Joint Hospital for Infectious Diseases, High Grove, East Grinstead, will be found at the end of this report.

SANITARY CIRCUMSTANCES OF THE AREA.

Water Supplies.

The supply of good drinking water is a constant problem in a rural area, and in this district the Council has by a progressive policy solved the problem in most of the areas. The large villages are supplied by companies operating in the district and at the instigation of the Council, main water has been afforded to some of the smaller hamlets.

The village of Frant now has main water supply from an adjacent spring by arrangement with the Borough of Royal Tunbridge Wells. Hartfield has a supply from the East Grinstead Gas and Water Company, and in the villages of Nutley and Fairwarp main water is available from the Council's springs situated at Hole Farm.

The latter is a modern, electrically controlled waterworks, capable of maintaining a daily output of 48,000 gallons. The plant commenced operations in November when it was officially opened by the Chairman of the Council, Mr. G. N. Worters. In the earlier stages, experiments were carried out with a view to determine the best method of reducing the iron content and raising the alkalinity of the water, which have resulted in the provision of an excellent drinking water that would compare most favourably with any in the country.

The question of a main supply at Five Ash Down was considered by the Council during the year, and it was found that apart from the difficulty of affording a company supply to the district, there was ample water in the wells from which the houses are served.

Main water supply to scattered hamlets in a rural district is not always practicable, but it can be said that where it is practicable, and where there is a need, the Council have taken the necessary steps for its provision.

Housing inspections which are carried out during the year always include an examination of the water supply, and supervision is kept on the state of existing wells affording a domestic supply of water, and on new wells which have been provided.

No habitation certificate is issued to any new house unless the water supply is considered adequate in quantity and quality.

It should be remembered by the public, however, that some care and precaution is necessary to prevent contamination of well water. Contamination is not always associated with a cloudy water and the clarity of any water is no indication of its purity. Efficient covers should be provided to wells and the walls should be maintained in a good state of repair. Domestic animals and herds should not have access to the well or the land surrounding it. Wells should be so constructed and kept in such repair that surface water contamination is impossible and the use of lead piping in any water supply system should only be countenanced, as far as the natural water of the district is concerned, in alkaline treated water.

During the year, twenty-one samples of water from existing wells and springs were analysed by the County Analyst. Of these samples, nine were reported as unfit for drinking purposes, whilst three were unsatisfactory due to the turbidity of the water.

Main water supply has been laid on to several of the houses where the well water was found to be unsatisfactory, and in the remaining cases the cleansing of the wells remedied the impurity of the supply.

Drainage and Sewerage.

Much has been done during the year to improve the methods of sewage disposal throughout the district and the particulars of the improvements carried out give little indication of the time and labour expended by the Council and its officials on another problem of local government in a rural area.

Framfield.

A sewerage scheme for this village was completed in December, 1936.

Forest Row.

An extension of the sewer to serve the Wall Hill area of this district was completed during the year.

Mayfield.

St. Dunstan's Croft Estate.

The sewer extension to this Estate was completed.

Five Ashes Council Cottages.

These eight cottages were re-drained during the year.

Rotherfield.

A further small extension of the sewerage scheme was carried out.

Withyham.

St. John's and Ocklye Outfall Works.

Following a report by the Surveyor, the above works are to be modernised and extended, and preliminary work was in progress at the end of the year.

Groombridge Sewer Extension.

A sewerage scheme to serve the sixteen Council cottages at Groombridge and several adjacent properties was formulated during the year, and work on the necessary sewers and Pumping Station was commenced on 16th October, 1936.

Wadhurst.

At the Station Road Works, the filter bed was reconstructed and alterations made to the settling tanks.

Uckfield.

An extension of the sewer was made to serve several new properties.

There have been requests from hamlets and villages during the year for main drainage, especially in those districts where main water supply is available.

It can be stated here with all truth that were cost not a necessary consideration, then main water supply and drainage would be available throughout the district.

Provided land is available, and in rural districts it is generally so, any house or cottage can at small cost provide an efficient drainage system. The land does the work of sewage purification and with properly constructed cesspools with the overflow disposed of by land filtration, drainage presents no difficulty.

Unfortunately, in some districts, scant attention has been paid to maintenance of the system and cesspools have been allowed to become faulty and the overflow permitted to find its own purification.

Where land has not been available for the efficient treatment of sewage, the Council has provided main drainage.

Many different factors enter into the construction of any main sewerage scheme, not the least of which is the contour of the land on which the houses are situated. To provide main drainage for every house in some villages and hamlets may mean three or more outfall works, a costly and impracticable provision.

The question of main drainage for the hamlet of Five Ashes was seriously considered during the year and it was found that those faults which did exist in the present arrangements were due to failure to maintain in repair the existing cesspools and overflows.

Rivers and Streams.

One case of stream pollution occurred during the year. This was due to sewage from certain buildings—including a laundry—at a large house discharging to a ditch which carried the effluent to a stream.

The nuisance was abated, the drainage being connected to the Council's Disposal Works.

Closet Accommodation.

During the year under review, 17 earth closets and 3 midden privies were converted to water closets.

Public Cleansing.

Four lorries and seventeen men (including a Cleansing Superintendent) are employed in the collection of house refuse. A weekly collection is made in the parishes of Crowborough, Mayfield and Uckfield, and a fortnightly collection in the rest of the district.

Controlled tipping for the disposal of the refuse is in force in the district, the tips being situated in Crowborough, Mayfield and Maresfield.

Cesspool Cleansing.

Cesspool cleansing by the District Council was continued in the parish of Crowborough, and twenty-one cesspools received attention at various times of the year, the total number of cleansings being thirty-two.

SANITARY INSPECTION OF AREA.

(T. Burdett, Chief Sanitary Inspector).

Infectious Diseases.

Number of visits or inquiries made	...	...	...	160
Number of Rooms disinfected:—				
After infectious diseases	...	...	...	71
After non-infectious diseases	...	...	...	20*

*Includes a small ward disinfected at the request of a local Cottage Hospital.

Inspection and Supervision of Food.

The following statistics relate to work carried out under the Public Health (Meat) Regulations and Public Health Acts:—

Total number of visits to shops, slaughterhouses and other premises	...	...	...	...	1,432
Number of visits at the time of slaughter	...	...			309

Carcases inspected.

Beef	...	...	...	...	...	354
Mutton or Lamb	...	...	...	...	...	1,200
Pork	...	...	...	...	...	1,075
Veal	...	...	...	...	...	163
Total number of instances in which diseased or unsound meat was surrendered	...	...	...			83
Number of notices of diseased conditions received	...					41
Number of instances in which diseased or unsound meat was found during the course of inspection						42

	<i>Bullocks. Pigs. Calves. Sheep.</i>			
Carcases condemned for Tuberculosis	...	5	6	—
,, ,, other reasons	—	10	2	3
	<i>Tons. Cwts. Qrs. Lbs.</i>			
Total weight of meat surrendered	...	3	2	2

During the year, cautions were given in respect of the following offences:—

Failure to give notice of slaughter	...	...	...	1
Failure to give notice of diseased conditions	...	...		1

The arrangement with the Acme Chemical Company, of Tonbridge, for the disposal of diseased carcasses still exists.

Slaughter of Animals Act, 1933.

In connection with the above Act, which requires that all persons engaged in the slaughter of animals shall hold a license granted by the District Council, two applications were received and licenses granted. At the end of 1936 there were sixty-seven licenced Slaughtermen in the district.

Slaughterhouse Regulations and Byelaws.

There are thirty-four slaughterhouses in the district, fourteen of which are registered and twenty licensed.

In two instances requisitions were made to limewash the premises, and these were carried out.

Knacker's Premises.

There is only one knacker's yard in the area, and this was re-licenced during the year. Seven routine visits were made to the premises, when conditions were found to be satisfactory.

Milk Supply.

One thousand, six hundred and fifty-one visits were made to dairy premises in the district, five hundred and thirty-five of these occurring at the time of milking.

During the year the following structural improvements to dairy premises were completed :—

Walls, ceilings, etc., cleansed and improved	...	...	7
Cowshed and Dairy floors improved	...	...	23
Additional lighting provided	...	...	11
Additional ventilation provided	...	...	10
New Dairies provided	...	...	14
New Cowsheds provided	...	...	9
Cowsheds enlarged	...	...	1
Drainage system provided for Dairy and Cowshed	...	...	6
Drainage to Cowshed improved	...	...	7
New Washing-up Room provided	...	...	1
New Cooler provided	...	...	2
Standings improved	...	...	3
Main water laid on	...	...	1
Defective pails replaced	...	...	2
Yards improved	...	...	3

As a result of unsatisfactory conditions noted at the time of inspection, it was necessary to issue eighty-three informal notices, twenty-eight of which have been complied with.

Common Lodging Houses.

With the demolition of the Old Brewers' Arms, Mayfield, the only Common Lodging House in this rural area ceases to exist.

Factories and Workshops.

During the year, one hundred and ninety-six inspections of factories and workshops were made. Certain unsatisfactory conditions were noted, including several cases of uncleanness. Informal notices were issued and in the majority of cases have been complied with.

Shops Act, 1934.

Two hundred and eighty-two visits were made during the year in connection with this Act. It was found necessary to make a number of requisitions upon owners, and the following improvements have been effected :—

Ventilation improved	...	...	4
Washing facilities provided	...	...	1
Insanitary sink replaced	...	...	1
W.C.s provided, cleansed or improved	...	...	6
W.C. pans cleansed	...	...	5

An application was received for exemption from the requirements of the Act in regard to sanitary accommodation and washing facilities. As the necessary alternative accommodation was available, Certificates of Exemption were granted.

Public Health and Housing Acts.

The repairs and improvements enumerated below, affecting one hundred and ninety-six cottages, were completed during the year. Two thousand, three hundred and eighty-two visits were made in connection with these, and

one hundred and eighteen owners or agents were met by appointment in connection with the repairs required.

Walls, ceilings, etc., repaired	...	...	...	...	...	98
Floors re-laid and repaired	...	...	...	...	...	95
Damp walls remedied	...	...	...	...	...	74
Damp brick floors remedied	...	...	...	...	...	35
Roofs repaired	...	...	...	...	...	61
Stairs or staircases repaired	...	...	...	...	...	23
Windows provided or enlarged	...	...	...	...	...	22
Windows made to open, repaired, etc.	...	...	...	...	...	125
Yards re-paved or repaired	...	...	...	...	...	45
Drainage systems repaired or provided	...	...	...	...	...	66
Drains cleansed, trapped, ventilated, repaired	...	...	...	...	...	52
Glazed sinks provided	...	...	...	...	...	36
Sink wastes trapped or provided	...	...	...	...	...	83
Defective gullies replaced	...	...	...	...	...	25
Eaves gutters and fall pipes repaired or provided	...	...	...	...	...	56
Number of additional W.C.'s provided	...	...	...	...	...	8
W.C.'s repaired, ventilated, cleansed, etc.	...	...	...	...	...	49
Flushing apparatus improved or provided	...	...	...	...	...	64
Number of additional E.C.'s provided	...	...	...	...	...	1
E.C.'s converted to W.C.'s	...	...	...	...	...	17
M.P.'s converted to W.C.'s	...	...	...	...	...	3
M.P.'s converted to E.C.'s	...	...	...	...	...	8
Defective Stoves repaired or renewed	...	...	...	...	...	18
Food Stores provided, ventilated or improved	...	...	...	...	...	25
Doors repaired or renewed	...	...	...	...	...	37
Chimneys repaired, etc.	...	...	...	...	...	9
Coppers provided or repaired	...	...	...	...	...	6
Well Covers provided or repaired	...	...	...	...	...	2
E.C.'s provided or repaired	...	...	...	...	...	2
Cesspools provided	...	...	...	...	...	5

Byelaws Relating to Tents, Vans and Sheds.

Forty-five visits were made in connection with these Byelaws, and the conditions found were, in the majority of cases, satisfactory. It was, however, found necessary to take special action in two instances.

In one case proceedings were successfully taken against the owner of certain land (the subject of an Order issued by the Justices in 1932 prohibiting the use of the land by or in connection with vans or similar structures) for the contravention of the Court Order.

In the second case a Statutory Notice under Section 43 of the Public Health Act, 1925, was issued. This Notice was complied with, the vans concerned removing from the land in question.

Byelaws Relating to Hop-pickers.

Nine farms in the district employed imported labour during the hop-picking season. This labour consisted of 18 men, 99 women and 89 children. Sixty-one visits were made in connection with the Byelaws, and the conditions noted, on the whole, were satisfactory.

Miscellaneous.

One hundred and seventy-three complaints were received during the year, three hundred and eighty-one visits being made in connection therewith. Wherever necessary, action was taken to correct the unsatisfactory conditions giving rise to the complaint. In addition, eight hundred and seventy-four visits were made in connection with matters of a general nature.

Rats and Mice Destruction Act.

A number of applications for advice on the destruction of rats were received during the year, and seventeen visits were made in connection therewith.

National Rat Week was held from the 2nd to the 7th November, 1936. Appropriate posters were obtained, together with pamphlets setting out methods to be taken for the destruction of rats and mice, and circulated in the district.

HOUSING.

1. Inspection of Dwelling-Houses during the Year :—

(1)	(a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	207
	(b)	Number of inspections made for the purpose ...	207
(2)	(a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	181
	(b)	Number of inspections made for the purpose ...	181
(3)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	10
(4)		Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	171

2. Remedy of Defects during the Year Without Service of Formal Notices :—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	196
--	-----

3. Action under Statutory Powers during the Year :—

(a)	Proceedings under sections 17, 18 and 23 of the Housing Act, 1930 :	
(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	9
(2)	Number of dwelling-houses which were rendered fit after service of formal notices :—	
	(a) By Owners	Nil
	(b) By Local Authority in default of owners	Nil
(b)	Proceedings under Public Health Acts :—	
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	21
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices :—	
	(a) By Owners	Nil
	(b) By Local Authority in default of owners	Nil

(c) Proceedings under sections 19 and 21 of the Housing Act, 1930:—

- (1) Number of dwelling-houses in respect of which Demolition Orders were made 5
- (2) Number of dwelling-houses demolished in pursuance of Demolition Orders *4
- * Includes two houses outstanding from 1935.

(d) Proceedings under Section 20 of the Housing Act, 1930:—

- (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made Nil
- (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit Nil

4. Housing Act, 1935—Overcrowding :—

- (a) (1) Number of dwellings overcrowded at the end of the year 37
- (2) Number of families dwelling therein 38
- (3) Number of persons dwelling therein 262
- including
children
under one
year of age.

Units.		As married couples.	Over 10 years.		Under 10 years.		Under 1 year.	
Per- mitted.	Actual		M.	F.	M.	F.	M.	F.
172	222½	66	75	46	30	41	1	3

- (b) Number of new cases of overcrowding reported during the year Nil
- (c) (1) Number of cases of overcrowding relieved during the year 15
- (2) Number of persons concerned in such cases 122
- including
one child
under one
year of age

As married couples.	Over 10 years.		Under 10 years.		Under 1 year.	
	M.	F.	M.	F.	M.	F.
34	33	26	17	11	—	1

As stated above, the total number of houses overcrowded at the end of the year was 37. In the return to the Ministry of Health made on the 28th July, 1936, there were 46 houses found to be overcrowded according to the standard of the Act.

This number subsequently rose to 52 houses and these were distributed in the various parishes as under.

<i>Parish.</i>	<i>No. of Houses Overcrowded.</i>			
Buxted	...	...	3	(1 Council House)
Crowborough	...	...	11	(2 Council Houses)
Fletching	...	...	1	
Forest Row	...	...	3	
Framfield	...	...	2	
Hartfield	...	...	2	(1 Council House)
Isfield	...	...	3	
Maresfield	...	...	5	
Mayfield	...	...	4	
Rotherfield	...	...	1	
Wadhurst	...	...	6	
Withyham	...	...	5	
Uckfield	...	...	6	(4 Council Houses)
			—	
<i>Total ...</i>			52	(8 Council Houses)
			—	

The overcrowding has been abated in 15 cases bringing the number down to 37 at the end of the year.

At the time of writing this number has been considerably reduced and no difficulty is anticipated in dealing with the remainder.

Housing Needs.

The Council is concerned with the housing needs of the district and during 1937 investigations are being made in every parish regarding the need for working class dwellings.

Where the need is established the Council will expedite the erection of an adequate number of working class dwellings.

SCHOOLS.

Particular attention has been paid during the year to the debilitated and malnourished child. Through the good offices of the Rural Community Council, it is possible for children suffering from malnutrition to be provided with free milk, and in schools, where a daily canteen exists, with free mid-day meals, on the recommendation of the School Medical Officer.

There should be no stinting of praise for those schools which have made provision for canteen meals at mid-day for the children.

For approximately twopence a head per day, a child is supplied with a very satisfying, very nourishing and very appetising meal of two courses.

Some of these children walk two miles or more to school and a canteen meal is a healthy improvement on the old time "packet lunch."

The general public know little about the work done at these canteens and the credit that is due to the teaching staff and the canteen helpers.

Canteens exist at the Forest Row, Groombridge, Hammerwood, Nutley, and Mayfield Schools.

There have been some improvements carried out in school premises but much of what was said in the report of last year regarding them still obtains.

Many of the school buildings are obsolete, dark dingy reminders of the slate and slate pencil era and in some schools the arrangements for heating are totally out-of-date.

There are many classrooms where one Tortoise stove of immense proportions burns in one corner of the room, subjecting the teacher and the front row of scholars to tropical heat whilst those in the back row and in the furthest corner of the room must feel extremely cold in winter.

The heating, lighting and ventilation of many of the rural schools urgently need improvement.

The following schools were closed during the year for the periods stated :—

<i>School.</i>	<i>Period.</i>	<i>Disease.</i>
St. John's C.E., Withyham	6th Jan.—10th Jan. inclusive.	Mumps.
Mayfield C.E.	11th Feb.—21st Feb.	Measles.
	24th Feb.—28th Feb.	Measles.
Fairwarp C.E.	11th Feb.—21st Feb.	Measles.
	25th Feb.—28th Feb.	Measles.
Framfield	17th Feb.—28th Feb.	Measles.
Tidebrook	25th Feb.—6th March	Whooping Cough.
	8th June—19th June	Measles.
	23rd June—30th June	Measles.
Cousley Wood	23rd March—8th April	Measles.
Uckfield R.C.	2nd April—8th April	Measles.
	10th Dec.—23rd Dec.	Influenza.
Maresfield	2nd April—8th April	Measles.
Crowborough	6th April—8th April	Mumps.
Council (Mixed)		
Crowborough	6th April—8th April	Mumps.
Council (Infants)		
Blackboys C.E.	27th May—12th June	Measles.
Wadhurst C.E.	19th June—3rd July	Measles.
	6th July—10th July	Measles.
Fletching C.E.	16th Nov.—4th Dec.	Whooping Cough.
Hadlow Down C.E.	14th Dec.—23rd Dec.	Chickenpox.

It is doubtful whether school closure in any but the fulminating infections serves any good purpose and medical opinion in the Public Health Services is inclined to this view.

Only in those schools where the children's homes are scattered over such a wide area that they are unlikely to meet when the school is closed, can closure be effective in preventing the spread of infection.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.

There are now 516 dairy premises on the register of the Uckfield Rural District Council.

During the year, 229 samples of milk were taken, and of these 53 were found to be unsatisfactory for the following reasons :—

Streptococci	...	...	...	...	...	24
Staphylococci	...	...	...	...	...	9
Streptococci and Staphylococci	...	...	...	...	...	4
Presence of Pus Cells	...	...	...	...	...	15
Presence of Dirt	...	...	...	...	...	1
						—
						53
						—

Where a milk is found to be below standard, the producer or the retailer is informed accordingly, and the assistance of this department is available in tracing and rectifying the contamination.

Repeat samples are always taken in cases where the milk is found to be below the required standard.

Milk (Special Designations) Order, 1936.

Licenses under the above Order were issued to three retailers. Four samples of designated milk were taken and submitted for bacteriological examination, two of which were unsatisfactory.

Particulars of these were forwarded to the County Authority for its information and necessary action.

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

The year has happily been free from epidemic disease.
The infectious diseases which did occur are tabulated below.

DISEASES.	TOTAL CASES NOTIFIED.	CASES ADMITTED TO HOSPITAL.	TOTAL DEATHS.
Smallpox	—	—	—
Scarlet Fever	46	41	—
Diphtheria	8	7	*1
Enteric Fever	1	—	—
Puerperal Fever	3	2	—
Puerperal Pyrexia	2	2	—
Pneumonia	16	2	3
Erysipelas	11	5	—
Acute Poliomyelitis	2	1	1
Ophthalmia Neonatorum	1	1	—
TOTALS	90	61	5

*Not removed to hospital.

The total of 90 notified cases of infectious disease is below the average of 117.6 based on the previous ten years.

In addition to the above, five cases notified as suffering from Scarlet Fever and one case notified as suffering from Erysipelas were removed to the Isolation Hospital, but were diagnosed as non-infectious diseases and were detained only a few days.

DISEASE.	AGE GROUPS.													TOTALS.
	Under 1 year.	1.	2.	3.	4.	5—10.	10—15.	15—20.	20—35.	35—45.	45—65.	Over 65 years.		
Scarlet Fever	—	1	2	3	3	12	12	6	4	3	—	—	46	
Diphtheria	—	—	—	—	—	6	1	—	—	—	1	—	8	
Enteric Fever	—	—	—	—	—	—	1	—	—	—	—	—	1	
Puerperal Fever	—	—	—	—	—	—	—	—	3	—	—	—	3	
Puerperal Pyrexia	—	—	—	—	—	—	—	—	2	—	—	—	2	
Pneumonia	—	—	1	—	—	1	—	—	4	3	3	4	16	
Erysipelas	—	—	—	—	—	—	1	1	2	1	6	—	11	
Acute Poiliomyelitis	—	—	—	—	—	—	2	—	—	—	—	—	2	
Ophthalmia Neonatorum	1	—	—	—	—	—	—	—	—	—	—	—	1	
TOTALS	1	1	3	3	3	19	17	7	15	7	10	4	90	

DISTRIBUTION OF INFECTIOUS DISEASES IN THE VARIOUS PARISHES.

	SCARLET FEVER.		DIPHTHERIA.		ENTERIC FEVER.		PNEUMONIA.		ERYSIPELAS.	
	Cases.	Removed.	Cases.	Removed.	Cases.	Removed.	Cases.	Removed.	Cases.	Removed.
Buxted	1	1	—	—	—	—	—	—	1	1
Crowborough	14	10	1	—	—	—	1	1	3	—
Fletching	—	—	—	—	—	—	1	—	—	—
Forest Row	1	1	—	—	—	—	2	—	—	—
Frant	5	5	—	—	—	—	5	—	—	—
Hartfield	9	9	1	1	—	—	3	—	1	—
Mayfield	—	—	1	1	—	—	—	—	1	—
Rotherfield	6	6	—	—	—	—	—	—	1	—
Uckfield	2	2	4	4	—	—	1	—	3	—
Wadhurst	6	5	—	—	—	—	1	1	—	3
Withyham	2	2	1	1	1	—	2	—	2	1
TOTALS	46	41	8	7	1	—	16	2	11	5

In addition to the above, two cases of Acute Poliomyelitis were notified from Mayfield, a case of Ophthalmia Neonatorum from Hadlow Down, and two cases of Puerperal Pyrexia from Crowborough. Also, a case of Puerperal Fever occurred at Fletching, one at Wadhurst and one at Frant.

IMMUNISATION.

In April of the year, a campaign for the immunisation of school children against diphtheria was launched.

The Council had decided that this immunisation should be offered free to school children by means of clinics held at the schools and that arrangements should be made for the supply, free of charge, of immunising material to the general practitioners of the district so that those parents who so desired, could have their children immunised by their own doctor. A standard fee of 10/-, payable by the parent, was fixed to cover one complete immunisation, carried out by the family doctor.

An immunisation scheme was an innovation as far as the rural districts of East Sussex were concerned. The response was greater than was anticipated and immunisation clinics have been held at Crowborough Council, Sir Henry Fermor's, Mayfield, Rotherfield and Nutley Schools where over 400 children were immunised.

Clinics are being held at other schools in the area during 1937.

Immunisation against diphtheria is now an established routine in most public health services and it has the support of the Ministry of Health.

In the Uckfield Rural District, the scheme is carried out by the District Council, but although it is available to all children over twelve months, children of school age have preponderated in the numbers immunised. It is now recognised that the optimum time for immunisation is that of pre-school age, namely, one to five years, and immunisation should be available at all Infant Welfare Centres in the county. Until this can be arranged, however, it is better that these younger children should be brought to the school when the Clinics are held.

Parents are welcomed to these Clinics. They see their children being immunised and they see how simple and almost painless is the process.

Immunisation against diphtheria need never become a compulsory measure and indeed compulsion is not necessary for those parents who wish to do the best for their children. It is better that the parents should think and reason out such matters for themselves than be at once antagonised by any compulsory immunisation law. There are limits to the interference with the liberty of the subject in matters of Public Health. When the public are more enlightened on the advantages of immunisation, and the simplicity and harmlessness of the actual process, then will immunisation become general throughout the child population of the country.

It should be stressed here that every doctor can be consulted regarding immunisation and that parents able to pay the reasonable fee of 10/- need not wait until the clinic is established at the child's school.

CANCER.

Deaths from Cancer during the Years 1931-1936.

YEAR.	MALES.	FEMALES.	TOTAL.	Rate per 1,000 estimated population.
1931	29	31	60	2.28
1932	18	37	55	2.18
1933	21	26	47	1.88
1934	36	41	77	2.15
1935	29	41	70	1.83
1936	32	41	73	1.89

Deaths from Cancer during 1936.

AGE PERIODS.				MALES.	FEMALES.	TOTAL.
25	...	...	...	—	1	1
35	...	...	...	1	3	4
45	...	...	...	1	7	8
55	...	...	...	10	10	20
65		...	...	13	8	21
75 and over	...	...	...	7	12	19
TOTALS	...	...	...	32	41	73

TUBERCULOSIS.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

Section 62, Public Health Act, 1925.

No action was taken under either of the above headings during the year under review.

Tuberculosis—New Cases and Mortality during 1936.

AGE PERIODS.				NEW CASES.				DEATHS.			
				Respiratory.		Non-Resp.		Respiratory.		Non-Resp.	
				M.	F.	M.	F.	M.	F.	M.	F.
0	...	...	...	—	—	—	—	—	—	—	—
1	...	...	...	—	—	—	—	—	—	—	—
5	...	...	...	—	—	—	—	—	—	—	—
15	...	...	...	2	3	1	—	—	1	2	—
25	...	...	...	4	6	—	1	2	1	—	—
35	...	...	...	2	3	1	—	1	2	—	—
45	...	...	...	2	1	1	—	3	—	—	—
55	...	...	...	4	1	—	—	2	—	—	—
65 and upwards	...	...	...	2	—	—	—	1	1	1	—
TOTALS	...	...	...	16	14	3	1	9	5	3	—

Four of the deaths were non-notified patients, three of which died outside the area.

AIR RAID PRECAUTIONS.

In accordance with the East Sussex County Scheme for Air Raid Precautions, steps were taken by the Uckfield Rural District Council to organise a scheme for the area. By the end of the year arrangements were well established and the plans of the scheme well advanced.

First Aid and Cleansing Stations are to be established at Crowborough, Uckfield, Mayfield and East Grinstead, and will be staffed by the members of the local branches of the British Red Cross Society.

Volunteers for all branches of Air Raid Precautions Work are still required.

EAST GRINSTEAD AND UCKFIELD JOINT
HOSPITAL COMMITTEE

Annual Report

OF THE

MEDICAL SUPERINTENDENT

OF THE

High Grove Isolation Hospital

FOR THE YEAR

1936

JUNE, 1937.

EAST GRINSTEAD AND UCKFIELD JOINT HOSPITAL COMMITTEE.

1st JANUARY, 1936.

Urban Members.

MRS. S. CROWHURST.
MR. A. T. BURT (Chairman).
MR. F. E. RICHARDS.

Rural Members.

MR. R. COATES.
MR. F. H. NIAS.
MR. G. WATSON.

1st APRIL, 1936.

Urban Members.

MRS. H. M. MUNN.
MR. A. T. BURT.
MR. F. E. RICHARDS.

Rural Members.

MR. F. H. NIAS (Chairman).
MR. G. A. WARBURTON.
MR. G. WATSON.

Clerk to the Committee.

MR. E. P. WHITLEY HUGHES.

Medical Superintendent.

R. SYDNEY DAVIDSON, M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Superintendent.

H. B. SHAW, M.B., M.R.C.S.

Matron.

MISS J. THORNTON RUDDY, S.R.N.

Surveyor.

H. CAMPBELL GOLDING, M.Inst. M. & C.E., M.R.San.I., A.M.I.S.E.

TO THE CHAIRMAN AND MEMBERS OF THE EAST GRINSTEAD
AND UCKFIELD JOINT HOSPITAL COMMITTEE,

MR. CHAIRMAN, MADAM AND GENTLEMEN,

I have the honour to present the third Annual Report on High Grove Isolation Hospital for the year ended 31st December, 1936.

In the report, scarlet fever cases have been graded according to their length of stay in hospital, and it will be seen that the group with the largest number is comprised of cases who averaged 29 days in hospital. These are mild scarlet fevers and among medical men concerned with public health administration opinions differ as to whether mild cases should be nursed at home or in hospital.

Providing home conditions are suitable, mild cases could well be nursed there, but unfortunately the prognosis in scarlet fever is difficult and mild cases can only be diagnosed with accuracy in retrospection.

In view of much that has been written and said about scarlet fever in the lay and medical press during the year, this disease has been dealt with at some length in the report, and details are given of four cases of particular interest.

The new drug Sulphonamide, which is advocated as the new specific remedy for streptococcal infections is being given to selected cases.

Attention should be drawn to the two occasions when the services of a skilled surgeon were urgently required for two scarlet fever patients, and the excellent results obtained after the operations.

The glass verandahs now attached to every block have again proved their worth in the nursing of pneumonia cases when an adequacy of light and ventilation is an essential part of the treatment.

I am again indebted to the members of the committee for the kindness and consideration given to my monthly reports, and to the Matron and her Staff for their loyal co-operation.

I have the honour to be,

Your obedient Servant,

R. SYDNEY DAVIDSON,

Medical Superintendent.

HIGH GROVE ISOLATION HOSPITAL.

The admissions for the year 1936 were 140, which is less than the 191 cases admitted during the previous year and the 210 of the year 1934.

No epidemic occurred during the year in the districts of the constituent authorities, nor in the adjacent urban and rural districts from which cases are admitted. In respect then of the total admissions, the year can be regarded as a standard for any year in which epidemics do not occur in any of the districts the hospital serves.

Scarlet fever admissions were 80 compared to 97 in 1935 and 139 of 1934, and diphtheria admissions 26 compared to 60 in 1935 and 55 in 1934.

As in former years, admissions were most numerous during the autumn and winter months.

Table I.—Monthly Admissions, 1936.

MONTH.	SCARLET FEVER.	DIPHThERIA.	TOTALS.
JANUARY	14	2	16
FEBRUARY	8	6	14
MARCH	12	5	17
APRIL	7	3	10
MAY	8	3	11
JUNE	2	—	2
JULY	4	—	4
AUGUST	6	1	7
SEPTEMBER	4	2	6
OCTOBER	—	1	1
NOVEMBER	5	3	8
DECEMBER	10	—	10
TOTALS	80	26	106

There were 23 cases remaining in hospital on the 31st December, 1935, and 13 cases remaining on the 31st December, 1936. These cases, together with the admissions during the year, are given in detail in Tables II, III and IV.

Table II.—Remaining in Hospital, 31st December, 1935.

DISEASE.	EAST GRINSTEAD. U.D.C.	UCKFIELD. R.D.C.	CUCKFIELD. R.D.C.	HORSHAM. U.D.C.	HORSHAM. R.D.C.	TOTALS.
SCARLET FEVER	4	2	1	2	—	9
DIPHTHERIA	1	5	—	4	—	10
DIPHTHERIA CARRIERS ...	—	1	—	—	—	1
MEASLES	—	1	—	—	—	1
INFLUENZA	1	—	—	—	—	1
SYPHILIS	1	—	—	—	—	1
TOTALS	7	9	1	6	—	23

Table III.—Remaining in Hospital, 31st December, 1936.

DISEASE.	EAST GRINSTEAD. U.D.C.	UCKFIELD. R.D.C.	CUCKFIELD. R.D.C.	HORSHAM. U.D.C.	HORSHAM. R.D.C.	TOTALS.
SCARLET FEVER	—	10	—	—	1	11
DIPHTHERIA	1	—	—	—	—	1
TONSILITIS	—	1	—	—	—	1
TOTALS	1	11	—	—	1	13

Table IV.—Admissions 1936.

DISEASE.	EAST GRINSTEAD. U.D.C.	UCKFIELD. R.D.C.	CUCKFIELD. R.D.C.	HORSHAM. U.D.C.	HORSHAM. R.D.C.	TOTALS.
SCARLET FEVER	20	39	—	11	10	80
DIPHTHERIA... ..	16	6	—	—	2	24
NASAL DIPHTHERIA	2	—	—	—	—	2
DIPHTHERIA CARRIERS	9	1	—	—	—	10
ERYSIPELAS	3	5	1	—	—	9
TONSILITIS	2	4	—	—	—	6
MEASLES PNEUMONIA	2	—	—	—	—	2
MEASLES	1	—	—	—	—	1
PARATYPHOID	1	—	—	—	—	1
CHICKEN POX	1	—	—	—	—	1
INFLUENZAL PNEUMONIA	—	4	—	—	—	4
TOTALS	57	59	1	11	12	140

The actual discharges during the year were 150 and it is on these figures that the report is based. These discharges comprise those remaining in hospital on 31st December, 1935, together with the cases admitted during the year, but less those cases remaining in hospital on 31st December, 1936.

The discharges for the period are given in Table V.

Table V.—Discharges 1936.

DISEASE.	EAST GRINSTEAD. U.D.C.	UCKFIELD. R.D.C.	CUCKFIELD R.D.C.	HORSHAM U.D.C.	HORSHAM R.D.C.	TOTALS.
SCARLET FEVER	24	31	1	13	9	78
DIPHTHERIA	16	11	—	4	2	33
NASAL DIPHTHERIA	2	—	—	—	—	2
DIPHTHERIA CARRIERS	9	2	—	—	—	11
ERYSIPELAS	3	5	1	—	—	9
TONSILITIS	2	3	—	—	—	5
MEASLES PNEUMONIA	2	—	—	—	—	2
MEASLES	1	1	—	—	—	2
PARATYPHOID	1	—	—	—	—	1
CHICKEN POX	1	—	—	—	—	1
INFLUENZAL PNEUMONIA	—	4	—	—	—	4
INFLUENZA	1	—	—	—	—	1
SYPHILIS	1	—	—	—	—	1
TOTALS	63	57	2	17	11	150

There is one death to record (erysipelas) which gives a mortality rate of 0.66% for all diseases.

SCARLET FEVER.

Cases 78, Deaths Nil, Case Mortality 0% (1935 2.1%)

Scarlet fever is an enigma among infectious diseases. It is so often mild in its course that it is more a slight indisposition exhibiting a rash and a sore throat than a disease necessitating isolation and hospital treatment. It is again frequently a disease that causes painful glandular swelling in the neck or an ear discharge with a severe infection of the mastoid cells which may keep a patient in hospital several weeks.

It is occasionally a relentless infection wherein multiple abscesses occur and a fatal septicaemia follows.

It is impossible to foretell on admission with any degree of accuracy which case will be uneventful and which case will cause anxiety in the course of the disease.

The patient with a most brilliant rash, severe congestion and oedema of the throat may cause little or no trouble after the first few days, whereas the patient with the faintest rash and the mildest of sore throats may in the course of the disease exhibit the whole gamut of scarlet fever complications.

The causative organism is still deemed to be the haemolytic streptococcus, of which there are many strains differing in virulence. The same organisms may cause scarlet fever in one person, tonsilitis in another, erysipelas in another, puerperal fever in a parturient woman, and should it gain access to the body through a cut or an abrasion a rapidly fatal septicaemia may ensue.

From the wide districts this hospital serves cases of scarlet fever differing in the virulence of the infecting organism are admitted and, as stated in the Annual Report for 1935, to prevent the occurrence of relapse scarlet fever, new admissions are kept separate from convalescent cases.

This procedure was actually put into practice during March of the year, since when no relapse scarlet fevers have occurred, the four cases in the present series occurring in January and February. Unless there are indications to the contrary, mild cases of scarlet fever are discharged at the end of four weeks.

Those whose high temperature and throat symptoms persist for over six days following admission are kept for a period of about five weeks, while those exhibiting the common complications and sequelae are retained for even longer periods.

The cases for review have been classified according to the length of stay in hospital and are tabulated hereunder. The average number of days in hospital per patient relative to each group is also shown.

<i>Group</i>	<i>Average days per Patient</i>	
I.—Cases discharged approximately 28 days after admission	33	29
II.—Cases discharged approximately 35 days after admission	15	35
III.—Cases discharged approximately 42 days after admission	21	44
IV.—Cases discharged after long period in hospital	9	87.6

In Group I no complications occurred, and in Group II measles occurred in one case during convalescence, and in another case the patient was admitted with a severe scald of the right hand which prolonged his stay a few days.

In Groups III and IV one or more complications were present in every case. Measles occurred as a complication in seven cases. This is unavoidable during a measles epidemic.

A patient is admitted with scarlet fever and is, unknown to the hospital authorities and probably to his parents, a measles contact. After a few days in hospital he or she develops measles and the whole ward is infected. Those children who have had measles are separated and placed in one ward, those who have not had measles are placed in another ward, and the original case is nursed in yet another ward.

New cases are then carefully placed in appropriate wards on admission so that those admitted to hospital who have not had measles are kept separate from the measles contact, while on the other hand a new admission with a definite history of measles can, if needs must, be placed in the Scarlet-Measles Ward.

Meanwhile the contacts are examined thoroughly from the ninth to the fifteenth day for signs of measles. Few, if any, of those who have not had measles ever escape an attack once they are exposed to infection since it is one of the most infectious of diseases.

In the seven cases of measles, three occurred from one admission and some weeks later two cases from another admission, both of which were suffering from scarlet fever and incubating measles when admitted to hospital.

Excellent results are obtained in the prevention of measles by the use of Convalescent Measles Serum, but the supply of serum is limited. Nevertheless such serum could and would be obtained for any case of scarlet fever exposed to measles infection where an attack would seriously prejudice the child's chance of recovery.

Complications occurred in 30 cases which comprise Groups III and IV and are here tabulated.

Measles	...	...	...	...	...	...	...	7 (including 1 case Group II).
Relapse Scarlet Fever			...	...	...	...	...	4
Secondary Tonsilitis			...	...	...	...	...	4
Albuminuria	...	...	...	...	...	...	...	4
Cervical Adenitis	...	...	...	...	...	...	...	3
Right Otorrhœa	...	...	...	...	...	...	...	3
Left Otorrhœa	...	...	...	...	...	...	...	2
Double Otorrhœa	...	...	...	...	...	...	...	2
Rheumatism	...	...	...	...	...	...	...	2
Broncho-Pneumonia			...	...	...	...	...	1
Impetigo	...	...	...	...	...	...	...	1
Tubercular Cervical Adenitis			...	...	...	...	...	1
Burns	...	...	...	...	...	...	...	1
Scald	...	...	...	...	...	...	...	1 (Group II).
Parotid Abscess			...	...	...	...	...	1
Gluteal Abscess	...	...	...	...	...	...	...	1
Cellulitis—Right Arm	...	...	...	...	...	...	...	1
Total								39

Four cases of scarlet fever were retained in hospital for 104, 122, 107 and 120 days respectively, and particulars of these cases are given below.

Case Retained 104 Days.

This was a girl aged seven years, admitted from the Horsham Urban District, who developed a temperature at the end of her fourth week and a few days afterwards a very definite albuminuria. Right otorrhoea developed on the fortieth day of disease and persisted for eight weeks. She eventually made a complete recovery.

Case Retained 122 Days.

This was a boy aged five years, admitted from the Uckfield Rural District, who developed measles on the seventeenth day of disease. He had, on admission, a left otorrhoea which became aggravated as the result of his scarlet fever.

He still had a slight otorrhoea on discharge from hospital, but arrangements had been made to place him under the care of his own doctor to whom particulars of the history and treatment of the condition were forwarded by letter.

Case Retained 107 Days.

This case, a baby girl of sixteen months, was admitted from the East Grinstead Urban District. She developed broncho-pneumonia within a few days of admission and shortly afterwards swelling of rheumatic origin of the joints of the arms and legs occurred. These subsided, but on the thirty-sixth day of the disease an abscess appeared over the left wrist which was opened and effectively drained. This healed within a week but not before an abscess developed in the right thigh and over the right elbow joint. Under general anaesthesia these were opened and drained. The abscess in the thigh quickly healed but the right arm made no progress despite what appeared to be adequate drainage. Four weeks later it was evident that a deep-seated infection was present in the right arm, and a cellulitis was developing. In these circumstances an operation on the arm was performed by Mr. W. H. Gervis, of Tunbridge Wells, when free incisions were made in the upper and lower arm.

The child made a complete recovery with full use of the affected arm. It is seldom that a case of scarlet fever with such marked systemic infection recovers. This was a case which from admission gave rise to considerable anxiety, and it is a pleasure to record so remarkable a recovery.

Case Retained 120 Days.

This was a boy, aged five years, admitted from the Uckfield Rural District. He developed measles on the twenty-fourth day of disease, and on the forty-fifth day of disease he suffered a severe cervical adenitis, and a few days later a double otorrhoea. A parotid abscess developed after one hundred days in hospital and this was opened and drained by Mr. J. Walker Wood, of Tunbridge Wells. He made a complete recovery before being discharged from hospital.

In three of these four cases there was no evidence on admission that their stay in hospital was likely to be prolonged or eventful.

The average duration of stay per patient for all scarlet fever admissions was 38.4 days.

DIPHTHERIA.

Cases 35, Deaths Nil, Case Mortality 0% (1935 4.7%).

These cases are grouped hereunder according to the severity of the infection.

									<i>Average days per Patient</i>
Severe Faucial	...	...	...	...	...	...	...	8	69.4
Moderately Severe Faucial	...	...	...	...	...	...	...	15	48.8
Mild Faucial	...	...	...	...	...	...	...	10	37.5
Nasal	...	...	...	...	...	...	...	2	35.2

The average number of days in hospital is also shown.

No cases of the hæmorrhagic and rapidly fatal type of the disease were admitted during the year. Antitoxin was administered by the intravenous route in six cases.

Complications occurred in 10 cases as follows:—

Palatal Paresis	...	...	...	...	...	...	...	...	...	5
Nasal Regurgitation	...	...	...	...	...	...	...	...	...	2
Albuminuria	...	...	...	...	...	...	...	...	...	4
Cardiac Vomiting	...	...	...	...	...	...	...	...	...	1

An interesting fact is to be recorded that of the eighteen diphtheria admissions from the East Grinstead Urban District in which approximately 50 per cent. of the elementary school children had been immunised in the last quarter of the previous year, six children were admitted who had been immunised. Four of these were extremely mild cases, one was a moderately severe case with fairly extensive membrane and the remaining case was a severe faucial diphtheria. It should be stressed here that cases are so graded according to the membrane formation in the throat and not on the child's general condition. It is the extent of the membrane which gives an indication of the amount of toxin the disease is producing.

The moderately severe case made a rapid and uneventful recovery after the administration of 40,000 units of antitoxin intravenously and 40,000 intramuscularly.

The patient, a girl aged eight years, was in excellent physical condition at the time of infection and was admitted on the second day of the disease and remained in hospital 37 days.

The severe case, a boy aged 7 years, was rather a frail child and was admitted on the third day of the disease. Membrane formation was extensive and antitoxin was administered intramuscularly to the extent of 120,000 units. He remained in hospital 84 days and during the course of his illness developed palatal paresis, nasal regurgitation and albuminuria. He eventually made a complete recovery and though not a robust child, he was an extremely good patient which considerably helped his progress towards recovery.

These immunised cases are mentioned in some detail because they strengthen the case for diphtheria immunisation rather than weaken it. They developed diphtheria before they had developed the high degree of immunity which results from immunisation. That they had developed some immunity is evidenced by the fact that four were very mild cases and the moderately severe case ran the course of a mild infection.

Of the severe case it can only be said that despite his rather frail physique and the non-administration of antitoxin intravenously, he made a good recovery.

Of the remaining seven cases of severe faucial diphtheria, five were from East Grinstead Urban District and four of these were of school age and had not been immunised.

One case of mild faucial diphtheria became a persistent carrier and an operation for the removal of his tonsils and adenoids was performed six months after admission. It was then a further three months before repeated cultures from his nose proved him free from infection.

The average duration of stay in hospital for all diphtheria patients was 49.3 days.

DIPHTHERIA CARRIERS.

There were eleven diphtheria carriers discharged during the year. Five of these were members of one family from which one other member had been admitted suffering from severe faucial diphtheria.

The average duration of stay in hospital was 15.5 days.

ERYSIPELAS.

Cases 9, Deaths 1, Case Mortality 11% (1935 11%).

The one fatality to be recorded for the year falls in this section. The patient, a man of 44 years, was admitted with extensive erysipelas of the face and fauces which later developed into a cellulitis of the soft tissues of the neck. Despite free incision and evacuation of pus under general anaesthesia, the patient became weaker and death ensued seven days after admission.

One case, a girl aged 6 years, was admitted with facial erysipelas following mastoid operation. She was in hospital fifty-one days and made an excellent recovery.

The average duration of stay in hospital, excluding the fatal case, was 19 days.

OTHER DISEASES.

Influenzal Pneumonia—Cases 5.

One case was remaining in hospital on the 1st January and the remaining four cases were admitted during May when Influenza was general.

Average duration of stay in Hospital was 11.4 days.

Tonsilitis—Cases 5.

Of these patients, four were notified as scarlet fever and found on admission to have tonsilitis, and one case was notified as diphtheria and on admission found to be suffering from tonsilitis.

Three cases were discharged within seven days and the remainder within a fortnight.

Paratyphoid Fever	...	...	...	...	...	...	...	...	...	Cases 1
Measles Pneumonia	...	...	...	...	...	...	...	...	...	Cases 2
Measles	...	...	...	...	...	...	...	...	...	Cases 2
Chickenpox	...	...	...	...	...	...	...	...	...	Cases 1
Syphilis	...	...	...	...	...	...	...	...	...	Cases 1

This case was admitted for observation as a ? typhoid, but was later transferred to another hospital when the true diagnosis was established.

STAFF.

There is no serious illness to record as occurring among the staff during the year. Half of one block is used as a bedroom for two maids, and the increase in accommodation for the staff is still an urgent need.

